

## INSTITUTE

PLEASE PRINT LEGIBLY IN BLUE OR BLACK INK ONLY

## **Application for Admission to Diploma in Biblical Studies Program**

I.	Entry Date	Fall Semester	Fall Semester • Spring Semester • Summer Semester				
		<ul><li>Old Test</li></ul>	<ul> <li>Old Testament Studies 1</li> <li>Theological Studies 2</li> </ul>				
II.	Personal Info	rmation					
Legal N	ame Last		First	Middl	۵		
Logairi	233						
Perman	ent Address						
City		,	State	Zip			
Home p	) Dhone	( Cell phon	) e		Email address		
771	Dagleanound	Tar forman ation					
111	. Background	injormatioi	l				
Name of church you attend Denomination							
Pastor		Church Addr	ess				
500							
City				State		Zip	
	your present Ministry Involvemen		type of ministry, a	nd your specific role. If yo	u are not currently involve	d in a ministry	
and woul	ld like assistance in this regard, pl	ease indicate.					
IV	. Academic Re	cord					
	ng with the most recent, list all hig		rcitios vou bavo att	anded as well as your sur	mulative CDA		
Name of		City/State	rsities you nave att	Dates Attended	Graduation/GED Date	GPA	
	. 74						
V.	Application I	ee Each applica	t is responsible to	pay a non-refundable and	d non-transferable \$25 regi	stration fee.	
0	The application fee has been paid	by check #	on	(date).			
	he application fee has been paid by credit card on(date).						
0	The application fee has been paid	by cash on		(date)			